

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

7/7/2003-90138-012-\$150.00-\$150.00

0069212 AV

DOCUMENT # P00000108019

1. Entity Name

CORAL RIDGE TIRE & AUTO CARE, INC.



03 OCT 13 PM 1:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

3500 N. FEDERAL HWY  
FT. LAUDERDALE FL 33308

Mailing Address

3500 N. FEDERAL HWY  
FT. LAUDERDALE FL 33308



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1056282

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURFORD, PETER

3500 N. FEDERAL HWY

FT. LAUDERDALE FL 33308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPT  
BURFORD, PETER  
3500 N. FEDERAL HWY  
FT. LAUDERDALE FL 33308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVS  
BURFORD, CAROL  
3500 N. FEDERAL HWY  
FT. LAUDERDALE FL 33308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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☐ Change ☐ Addition

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CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-2-03

954-565-5554

Date

Daytime Phone #

CR2ED34 (4/03)



## **CORAL RIDGE TIRE & AUTO**

3500 N. Federal Highway • Ft. Lauderdale, FL 33308

Telephone (954) 565-5594 • Fax (954) 565-2336

100703

Florida Dept of State  
Divisions of Corporations  
UBR Filings  
PO Box 1500  
Tallahassee, Fl. 3202-1500

Sirs,

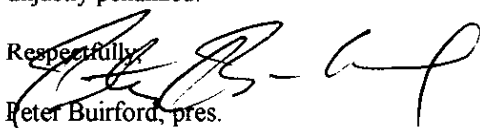
Enclosed is my \$600.00 for the UBR filing/reinstatement, however I am requesting a review of my fee paid.

I had originally sent in our first application and check for \$150.00 (copy enclosed) on 7-2-03 with a letter (as stated in your instructions) explaining that this was our first receipt of a UBR application.

I received notification on 7-8-03 rejecting my request for a waiver of penalty (enclosed) and called your dept and was told that they had not recieved this letter please send it again which I did on 7-8-03.

I have been told twice that there is no record of my letter, and now I am sending a copy of it again. I want somebody to look at my records as I beleive I am due some sort of consideration in the form of a refund for late fees as I had follwed all the instructions as given and have been unjustly penalized.

Respectfully,

  
Peter Buirford, pres.